

THE METROHEALTH SYSTEM
QUALITY & SAFETY COMMITTEE
BOARD OF TRUSTEES
REGULAR MEETING MINUTES

DATE: July 25, 2017

TIME: 10:00 a.m.

PLACE: MetroHealth Medical Center
K107, Business Services Building

COMMITTEE TRUSTEES: Mr. Moss, Mr. McDonald, Dr. Silvers

STAFF: Dr. Arora, Dr. Boulanger, Dr. Connors, Dr. Golob, Mr. Kaufmann, Ms. Kline, Mr. Lewis, Dr. Mercer, Mr. Spain

(ABSENT): Dr. Boutros, Dr. Chehade, Ms. Dee, Ms. Kiedio, Dr. Minor, Mr. Monnolly, Mr. Schneider, Mr. Stern and Ms. Whiting

Mr. Moss called the regular meeting of the Quality & Safety Committee to order at 10:04 a.m.

I. Approval of Minutes – April 25, 2017

The minutes of the April 25, 2017 Quality & Safety Committee Meeting were approved as presented.

II. DISCUSSION ITEMS

A. 2017 YTD Goals Performance – Mr. Kaufmann

Mr. Kaufmann presented the reports for ACO Quality Metrics, Hospital Performance for Decreased ED Time after the decision to admit, IP Discharge time of day, Care Pathways Developed and Implemented, PSI 90 Composite, HAI Reduction, SSI Reduction, 30-Day Readmissions, Sharp Injuries, Order Set Utilization, TeamSTEPPS implementation and care equitability YTD for 2017.

B. Hand Hygiene Program - Dr. Connors

Dr. Connors stated that he started the Hand Hygiene Program in late 2010 with four part-time hand hygiene monitors. After the first year, there was a 96 percent compliance rate and remained above 96 percent through 2016. Through the last six years it has been 90-95 percent compliant. We now have

two part-time hand hygiene monitors and the first measurements for 2017 indicate 89 percent compliant, which is better than the national average.

C. Clinical Quality Improvement Committee – Mr. Kaufmann

The CQIC (Clinical Quality Improvement Committee) brings together quality leaders from multiple areas and tracks quality improvement plans to develop clear reporting hierarchy. CQIC next steps will include developing QI reporting structure and data sharing, increasing interdepartmental collaboration, increasing number of QI projects completed, and creating an employee-driven QI program.

D. OB/GYN Quality Program – Dr. Arora

Dr. Arora stated that the entire department is involved in quality reporting. The staff has several avenues in which to report quality issues-in the monthly and quarterly meetings, and the quality bulletin board. All complaints are measured in real time and Dr. Arora reviews every outlier every month. There are ongoing QI Projects that include Breastfeeding, Antibiotics for Cesarean RCT, Obstetric Simulations Weekly, Postpartum Hemorrhage Kits, Post-placental IUDs, TeamSTEPPS, Safe Sleep Initiative, Colposcopy Clinic Patient Education, and Epic STORK.

III. NON-CONSENT/ACTION ITEMS

None

IV. CONSENT ITEMS

None

There being no further business to come before the Committee, the meeting was adjourned to executive session at 11:28 a.m.

Respectfully,

Mr. John Moss, Chairman
Board of Trustees